OFFICE OF RURAL HEALTH SERVICES ADVISORY BOARD MEETING MINUTES

Friday, August 20, 2004, Crisp Regional Hospital, Cordele, Georgia

Presiding: D. Wayne Martin, Chairman

Present: Isiah C. Lineberry

Valerie Buchanan Dianne Banister James A. Hotz, M.D.

Perry Mustian (By Telephone)

Raymond J. Otis, M.D.

ORHS Staff: Tony L. Brown

Sondra Hampton

Shaundra Smith-McKeithen

Sheryl McCoy

Visitors: Robert Mason, Director Programs and Services, Saint Joseph's Mercy Care Services

Elsie Brown, Director, Governmental Support and Member Services (GSMS)

Bill Brown, GSMS

Charlotte Vestal, Chief Financial Officer, Crisp Regional Hospital

The regular meeting of the Office of Rural Health Services' (ORHS) Advisory Board was held on Friday, August 20,2004, at Crisp Regional Hospital in Cordele, Georgia. Chairman Wayne Martin called the meeting to order at 10:45 a.m. Mr. Martin welcomed everyone and asked for a brief introduction from each attendee.

The minutes were approved as distributed.

Mr. Martin gave the *Chairman's Report* and talked about the future shortage of physicians in Georgia and programs in place that will help prevent the shortage. He stated there is a real shortage in the specialty care in emergency rooms. He said area coverage might be a solution for that problem; <u>i.e.</u>, Columbus specialty physicians also would cover the Albany area.

Information was distributed on the new regulations for small rural hospitals participation in the Indigent Care Trust Fund (ICTF). Mr. Martin explained that the change is good and will extend to several small hospitals that really need the service.

Mr. Martin shared with the members about a meeting the Governor is having on August 24,2004, with various professionals from throughout Georgia to discuss alternative ways to provide healthcare.

He also shared that the Medical Fair will be held on September 9-11, 2004. The Medical Fair is a good resource for hospitals and a good time to talk with medical students.

Mr. Lineberry presented a Departmental updated by reviewing the information on the medically needy, estate recovery, upcoming public meetings, and the draft agenda for the next DCH Board meeting.

Dr. Hotz asked if the increase in revenues collected this year will make a difference in the amount of monies cut from next year's budget?

Mr. Lineberry stated that the Governor is still cautioning spending too much money. He said the Office of Planning and Budget is still looking for creative ways to restructure the budget, and they will be exploring all options.

Dr. Hotz reiterated that the Cancer Initiative cannot function with the present funding. He stated that those involved in preparing the budget at this time can either cut programs or look for ways to generate revenue to provide for these existing and new programs that are needed in rural areas. He suggested that the ORHS Advisory Board might want to look at the effects of budget cuts in rural areas and the consequences of cutting programs; i.e., cancer program, in rural areas.

Mr. Ben Robinson, Executive Director, Georgia Board for Physician Workforce/State Medical Education Board, gave a presentation on the function of these offices:

- Critical Issues -- Access of Care
 - ✓ Cost
 - ✓ Appropriateness of Care

 - ✓ Quality of Care
 ✓ Economic Development
- ➤ Integral in meeting the Governor's Goals
 - ✓ Healthy Georgia
 - ✓ Safe Georgia
 - ✓ Educated Georgia
 - ✓ Growing Georgia
 - ✓ Best Georgia
- ➤ Georgia Board for Physician Workforce (OBPW) Programs:
 - ✓ Research/Analysis
 - ✓ Publications on physician workforce needs
 ✓ Medical Education supports

 - ✓ Graduate Medical Education Report
 - ✓ Physician community matching service
- > State Medical Education Board Programs
 - ✓ Medical Fair

 - ✓ Debt servicing✓ Medical student scholarship

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Mr. Robinson explained that Georgia's population is growing and the number of physicians entering the medical field is not enough to prevent a shortage of physicians in the next few years. At present, there is a shortage particularly in the specialist field; <u>i.e.</u>, radiology, oncology, diagnostic radiology, gastroenterology.

There also are distribution challenges to provide coverage for all counties in these medical fields. He indicated the new emerging needs are:

- Potential new programs
- > Building new partnerships
- ➤ Identifying new resources
- Continued analysis of medical education and physicians needs

Mr. Robinson said there has been a decline in the interest of students to become physicians, and they are trying to build programs that will encourage students to enter medical schools.

The question was raised concerning the current status of the J-l Visa Program.

Mr. Lineberry explained that the current program will end on September 30, 2004, but that Congress is looking at extending the program. The new program will begin October 1, 2004, presuming Congress approves the new plan. He stated Georgia has 30 slots in this program and all will be filled this year.

Tina Anderson-Smith, Senior Research Associate, Health Policy Center, gave a report on the progress of the *Rural Health Plan* revision. She asked the Board to do some brainstorming and give some feedback on strengthening rural health in Georgia. Some ideas for identifying needs and identifying the process were:

- > Engage communities as vehicles for information
- > Involve physicians
- ➤ People in the business
- ➤ Hospital staff
- > Input from grassroots level
- > Rural health clinics and community health centers
- Public health departments
- > Economic development
- Church groups
- Schools
- ➤ AHEC
- > Primary Care Association and other groups interested in rural health issues
- Faith-based groups
- > Legislative engagement

Ms. Smith shared that the mission and vision of this *Plan* need to be conveyed to the gatekeepers of communities. She said the spirit of the idea has to be clear. Study of other relationships and more collaboration with other groups will be necessary in order not to develop overlapping plans. She stated that in order to leave data in communities to be of service to them, it is important to involve them in the *Plan*. The *Plan* should be one that is easy to implement and easily understood. The *Plan* should be action oriented with measurable goals and benchmarks. The *Plan* should have managers implementing it on state and regional levels. Ms. Smith thanked the Board for their input toward this project.

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After some discussion, the date for the next Advisory Board meeting was set for Friday, October 15, 2004, at Crisp Regional Hospital. There being no further business, the meeting adjourned at 12:30 p.m.	
Respectfully,	
C. Wayne Martin, Chairman/Date	Sheryl McCoy, Recording Secretary/Date
Valerie Buchanan ORHS Advisory Board Secretary	